

Direct Aid Grant Worksheet Year _____	Local Funds	State Funds Other than Direct Aid	Federal Funds	Direct Aid Funds Requested
<b>I. Office Support</b>				
• Rent:				
• Purchases:				
• Utilities:				
• Office Equipment:				
• Other:				
			<b>Total Direct Aid:</b>	
<b>II. Personnel Support</b>				
<b>A. Administrative Secretary</b>				
• Total Salary:				
• Rate per Hour:				
• Hours Worked per Week:				
• Benefits:				
• Social Security:				
• Workman's Compensation:				
• Unemployment Insurance:				
• Health Insurance:				
• Retirement:				
• Other:				
			<b>Total Direct Aid:</b>	
<b>B. _____</b>				
• Total Salary:				
• Rate per Hour:				
• Hours Worked per Week:				
• Benefits				
• Social Security:				
• Workman's Compensation:				
• Unemployment Insurance:				
• Health Insurance:				
• Retirement:				
• Other:				
			<b>Total Direct Aid:</b>	

Direct Aid Grant Worksheet Year _____	Local Funds	State Funds Other than Direct Aid	Federal Funds	Direct Aid Funds Requested
<b>C.</b> _____				
• Total Salary:				
• Rate per Hour:				
• Hours Worked per Week:				
• Benefits:				
• Social Security:				
• Workman's Compensation:				
• Unemployment Insurance:				
• Health Insurance:				
• Retirement:				
• Other:				
			<b>Total Direct Aid:</b>	
<b>III. Program Support</b>				
<b>A. Existing Programs:</b>				
<b>1.</b>				
<b>2.</b>				
<b>3.</b>				
<b>B. New Programs:</b>				
<b>1.</b>				
<b>2.</b>				
<b>3.</b>				
			<b>Total Direct Aid:</b>	
		<b>Grand Total All Direct Aid:</b>		

**Comments or Additional Information:**

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